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Bib Data Sheet

CONFIRMATION NO. 1586

SERIAL NUMBER 09/924,079	FILING DATE 08/07/2001  RULE	CLASS 375	GROUP ART UNIT 2613	ATTORNEY DOCKET NO. 22682-06188
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APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*  
 This appln claims benefit of 60/309,239 07/31/2001

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
 \*\* 09/13/2001

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 13	TOTAL CLAIMS 47	INDEPENDENT CLAIMS 7
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35 USC 119 (a-d) conditions met  
☐ yes ☐ no ☐ Met after Allowance

Verified and Acknowledged  
 Examiner's Signature \_\_\_\_\_ Initials \_\_\_\_\_

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TITLE  
 CELL ARRAY AND METHOD OF MULTIREOLUTION MOTION ESTIMATION AND COMPENSATION

FILING FEE  RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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